## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

| The C/OH Instruction G  | uide explains how to complete this form.  1 Filer ID (Ethics Commission Filers)          | 2 Total pages filed:  |  |  |
|---|--|---|--|--|
| 3 CANDIDATE/  | MS/MRS/MR FIRST M  | OFFICE USE ONLY   |  |  |
| OFFICEHOLDER<br>NAME  | My Steve J.  | Date Received   |  |  |
|   | St. W. See Savage  | Abilene City Secretary  |  |  |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE 4810 Mary Laula Abilere, TX 79606 | JUN 2 1 2016 Filed for Record                                     |  |  |
| 5 CANDIDATE/<br>OFFICEHOLDER<br>PHONE                         | (325) 201-4100 (work cell)   | Date Hand-delivered or Date Postmarked                            |  |  |
| 6 CAMPAIGN  | MS/MRS/MR FIRST MI   | Receipt # Amount \$   |  |  |
| TREASURER<br>NAME   | Mys. Cvish Suffix  | Date Processed  |  |  |
|   | Savage   | Date Imaged   |  |  |
| 7 CAMPAIGN<br>TREASURER<br>ADDRESS                            | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE;                           | ZIP CODE  |  |  |
| (Residence or Business)                                       | 4810 Mary Low La Abilene, TX 79  | 3bob  |  |  |
| 8 CAMPAIGN<br>TREASURER<br>PHONE                              | AREA CODE PHONE NUMBER EXTENSION (375) 232-9212  |   |  |  |
| 9 REPORT TYPE   | January 15 30th day before election Runoff   | 15th day after campalgn treasurer appointment (Officeholder Only) |  |  |
|   | July 15 Sth day before election Exceeded \$500 limit                                     | Final Report (Attach C/OH - FR)                                   |  |  |
| 10 PERIOD<br>COVERED  | Month Day Year Month 04 / 28 / 2016 THROUGH 6  | 21 /2016  |  |  |
| 11 ELECTION   | ELECTION DATE ELECTION TYPE  | PE  |  |  |
|   | Month Day Year Primary Runoff Other Description  General Special                         |   |  |  |
| 12 OFFICE   | OFFICE HELD (if any)  13 OFFICE SOUGHT (if known)  | wn)   |  |  |
|   | Abilene City Conil-Place b Abilene City  | Council Place 6   |  |  |
| GO TO PAGE 2  |  |   |  |  |

## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

| THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED ON POLITICAL EXPENDITURES MADE BY POLITICAL CONSISTERS TO SUPPORT THE BENDERS TO PREVIOUS. THE REPORT THE BENDERS AND INVESTIGATE ON OPPORTUNES.  COMMITTEE TYPE  GOMMITTEE TYPE  GOMMITTEE TYPE  GOMMITTEE ADDRESS  2 110 N. MIGCKING BIRD  Additional Pages  TOTAL POLITICAL CONTRIBUTIONS  2. TOTAL POLITICAL CONTRIBUTIONS  GOTTALS ITEMEZED  1. TOTAL POLITICAL CONTRIBUTIONS  GOMMITTEES OF SUGNESS TO REPORTURES OF LOANS)  TOTALS  TOTAL POLITICAL EXPENDITURES OF SIGN OR LESS.  TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| COMMITTEE ADDRESS  2110 N. MOCKINGBIRD  Additional Pages  TOTAL POLITICAL CONTRIBUTIONS  (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  TOTAL POLITICAL EXPENDITURES  3. TOTAL POLITICAL CONTRIBUTIONS  (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  TOTALS  TOTAL POLITICAL EXPENDITURES  TOTALS  TOTAL POLITICAL EXPENDITURES  TOTALS  TOTAL POLITICAL EXPENDITURES  TOTALS  TOTAL POLITICAL EXPENDITURES  TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY   | THE BOX IS FOR HORSE OF POLITICAL CONTRIBUTIONS ACCEPTED ON POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CAMBOATE OF OFFICEHOLDER. THESE EXPENDITURES MAY HAVE SEEN MADE INTROJUT THE CAMBOATE'S OR OFFICEHOLDER'S INDICATED ON GOASENT, CAMBOATES AND OFFICEHOLDERS AND REGISTED TO REPORT THIS REFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPERITURIES. |  |  |  |  |  |
| COMMITTEE ADDRESS  ABILENE TX 79403  COMMITTEE CAMPAIGN TREASURER NAME  Jallu M. Marb  COMMITTEE CAMPAIGN TREASURER ADDRESS  2110 N. Mockendbird, Abilenc Tx 79403  1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  EXPENDITURE  3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  \$ 2,729  45  |  |  |  |  |  |  |
| ABSILENE TX 79603  COMMITTEE CAMPAIGN TREASURER NAME    Jaclua M. WARD   |  |  |  |  |  |  |
| COMMITTEE CAMPAIGN TREASURER NAME  Jackur M. WARD  COMMITTEE CAMPAIGN TREASURER ADDRESS  2/10 N. Mock Enbird, Abilenc TX 7960 S  17 CONTRIBUTION 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  \$ 3,50 CC  EXPENDITURE TOTALS  3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED  4. TOTAL POLITICAL EXPENDITURES  \$ 3,833 95  CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD   |  |  |  |  |  |  |
| TOTAL POLITICAL EXPENDITURES  2 TOTAL POLITICAL EXPENDITURES  3. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  CONTRIBUTION  5. TOTAL POLITICAL EXPENDITURES  CONTRIBUTION  6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  CONTRIBUTION  CONT |  |  |  |  |  |  |
| TOTAL POLITICAL EXPENDITURES  1. TOTAL POLITICAL EXPENDITURES  2. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS.  1. TOTAL POLITICAL EXPENDITURES  3. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL EXPENDITURES  7. TOTAL POLITICAL EXPENDITURES  8. TOTAL POLITICAL EXPENDITURES  8. TOTAL POLITICAL EXPENDITURES  9. TOTAL POLITICAL EXPENDITURES  10. TOTAL POLITICAL EXPENDITURES  11. TOTAL POLITICAL EXPENDITURES  12. TOTAL POLITICAL EXPENDITURES  13. TOTAL POLITICAL EXPENDITURES  14. TOTAL POLITICAL EXPENDITURES  15. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  16. OF REPORTING PERIOD  |  |  |  |  |  |  |
| 2/10 N. MOCKENGERD, Asilene TX 7960 3  1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS.  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  |  |  |  |  |  |  |
| PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  S. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD  |  |  |  |  |  |  |
| CONTRIBUTION BALANCE  OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  1. TOTAL POLITICAL EXPENDITURES  1. TOTAL POLITICAL EXPENDITURES  3. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  9. TOTAL POLITICAL EXPENDITURES  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY   |  |  |  |  |  |  |
| TOTALS  UNLESS ITEMIZED  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2729 45 OF REPORTING PERIOD  |  |  |  |  |  |  |
| CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY \$ 2729 45   |  |  |  |  |  |  |
| BALANCE OF REPORTING PERIOD  | 2  |  |  |  |  |  |
| CHITETONICING A TOTAL DRINGIBAL AMOUNT OF ALL CHITSTANDING LOANS AS OF THE   |  |  |  |  |  |  |
| CONTINUE 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$  |  |  |  |  |  |  |
| 18 AFFIDAVIT  Uswess, or effirm, under penalty of perjusy, that the accompanying report true and correct and includes all information required to be reported by m   | is<br>ne   |  |  |  |  |  |
| Danette Dunlap Notary Public State of Texas My Commission Expires  Why Commission Expires  |  |  |  |  |  |  |
| 05/19/2020<br>ID#519952-7 Signature of Candidate or Officeholder   |  |  |  |  |  |  |
| AFFIX NOTARY STAMP / SEAL ABOVE  |  |  |  |  |  |  |
| Sworry to and subscribed before me, by the said Steve Savage this the  |  |  |  |  |  |  |
| day of fluid 20 the to certify which, witness my hand and seal of office.  Another Vin Ico Motary And  | leli   |  |  |  |  |  |
| Signature of officer administering cath Printed name of officer administering cath   | oath   |  |  |  |  |  |
| Forms provided by Texas Ethics Commission www.ethics.state.tx.us Revised 9   | /8/2015  |  |  |  |  |  |

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 2

| 14 C/OH NAME S                        | 10.0  | 1   | 5 Filer ID (Ethics Commission Filers)  |  |  |
|---------------------------------------|---|---|--|--|--|
| ·····                                 |   | vase  |  |  |  |
| 16 NOTICE FROM POLITICAL COMMITTEE(S) | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OF CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE MOTICE OF SUCH EXPERDITURES. |   |  |  |  |
|                                       | COMMITTEE TYPE  | COMMITTEE NAME  | _  |  |  |
| •                                     | GENERAL   | Texas Association of Real tors  | - Political Action Committee   |  |  |
|                                       | SPECIFIC  | COMMITTEE ADDRESS   |  |  |  |
|                                       |   |   | TX 78786   |  |  |
| Additional Pages                      |   | COMMITTEE CAMPAIGN TREASURER NAME   |  |  |  |
| <u> </u>                              |   | COMMITTEE CAMPAIGN TREASURER ADDRESS  |  |  |  |
|                                       |   | P.O. JOY 2246 Austin TY   | 18768  |  |  |
| 17 CONTRIBUTION<br>TOTALS             | 1. TOTAL PLEDGI   | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM! | AN See Wher Poly   |  |  |
|                                       | 2. TOTAL<br>(OTHER  | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                              | \$   |  |  |
| EXPENDITURE<br>TOTALS                 | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS. UNLESS ITEMIZED   |   |  |  |  |
|                                       | 4. TOTAL  | POLITICAL EXPENDITURES  | <b>s</b>   |  |  |
| CONTRIBUTION<br>BALANCE               |   | POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>PORTING PERIOD                               | TDAY \$  |  |  |
| OUTSTANDING<br>LOAN TOTALS            |   | PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF<br>MAY OF THE REPORTING PERIOD                    | THE \$   |  |  |
| 18 AFFIDAVIT                          |   |   |  |  |  |
|                                       |   |   | perjury, that the accompanying report is formation required to be reported by me |  |  |
|                                       |   | Signature of Ca   | ndidate or Officeholder  |  |  |
|                                       |   | uguma a va  |  |  |  |
| AFFIX NOTARY STAI                     |   |   |  |  |  |
|                                       |   | by the said   |  |  |  |
| day of                                | , 20  | , to certify which, witness my hand and seal of office  | <b>3.</b>  |  |  |
| Signature of officer                  | administering oath  | Printed name of officer administering oath  | Title of officer administering oath  |  |  |

## SUBTOTALS - C/OH

## FORM C/OH COVER SHEET PG 3

| 19  | FILER NAME 20 Filer ID (Ethics Com   | ımission Filers) |
|-----|--|------------------|
| 21  | SUBTOTAL<br>AMOUNT   |                  |
| 1.  | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$ 3,250°        |
| 2.  | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$               |
| 3.  | SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$               |
| 4.  | SCHEDULE E: LOANS  | \$               |
| 5.  | SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS              | · 2579 18        |
| 6.  | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$               |
| 7.  | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS             | \$               |
| 8.  | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$ 1,12284       |
| 9.  | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                        | \$ 13193         |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH        | \$               |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$               |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$               |

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 4 Date City; State; Zip Code 4-28-16 Dut-of-state PAC (ID# Date Amount of contribution (\$) 4-29-16 Employer (See Instructions) Principal occupation / Job title (See Instructions Self employed Amount of contribution (\$) Full name of contributor aut-of-state PAC (ID#: Date out-of-state PAC (iD#: Abiler, TX 79606 Employer (See Instructions) Stinky Stere's Septic Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME > avage 7 Amount of contribution (\$) Dout-of-state PAC (ID#:\_\_ 4 Date Debra Lohse 6 Contributor address; OHMAR \$ 2500 Loll 8 Principal occupation / Job title (See Instructions) UNKnown Onknown out-of-state PAC (ID#: \_\_\_\_\_\_ Amount of contribution (\$) 05MAY 2016 P.O. Box 2246 Asky, TX 78768 / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Out-of-state PAC (ID#:\_\_\_\_\_ Amount of contribution (\$) Date 06 MA-1 \$ 3000 Jollo 898 Sayles Blud Abilene, TX 79605 Employer (See Instructions) Principal occupation / Job title (See Instructions) Un Known Unknown Full name of contributor Cinny Breland Contributor address; Out-of-state PAC (ID#: Date Amount of contribution (\$) 11 MAY City; State; Zip Code 2016 Employer (See Instructions) Principal occupation / Job title (See Instructions) Unknown Onknown ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

| EXPENDITURE CATEGORIES FOR BOX 8(a)  |   |  |   |  |
|--|---|--|---|--|
| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Contributions/Donations Made By<br>Candidate/Officoholder/Politica<br>Credit Card Payment | Event Expense<br>Fees<br>Food/Beverage Expense<br>Gift/Awards/Memorials Expense | Loan Repayment/Reimbursement<br>Office Overhead/Rental Expense<br>Polling Expense<br>Printing Expense<br>Salaries/Wages/Contract Labor | Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above) |  |
| 1 Total pages Schedule F1:   | : 2 FILER NAME Stee Savage 3 Filer ID (Ethics Commission Filers)                |  |   |  |
| 4 Date<br>4-28-2016  | 5 Payee name Conley Pr  | rinting  |   |  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code  |  |   |  |
| \$16427  | P.O. Box 6606 Abilene, TX 79608   |  |   |  |
| 8  | (a) Category (See Categories listed at the top of this so                       |  | itside of Texas. Complete Schedule T.   |  |
| PURPOSÉ<br>OF  |   | ļ <del>~~</del>  | n, TX, officeholder living expense  |  |
| EXPENDITURE  | Advertising Expense   |  |   |  |
| 9 Complete ONLY if direct  | Candidate / Officeholder name   | Office sought  | Office held   |  |
| expenditure to benefit C/OF  | Steve Saraye  | Abilarlity Come) - Placet  | Ablae City Coscil Pun   |  |
| Date   | Payee name  | /  |   |  |
| 02 MAY 2016  | Extreme Media /   | LaVoz  |   |  |
| Amount (\$)  | Payee address; City; State; Zi  | ip Code  |   |  |
| \$5000   | 209 S. Danville Dr. Ste A100 Abilere, TX 79605                                  |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this se                           | Check il travel ou   | tside of Texas. Complete Schedule T.<br>, TX, officeholder living expense   |  |
| EXPENDITURE  | Advertising Expense   |  |   |  |
| Complete ONLY if direct  | Candidate / Officeholder name   | Office sought  | Office held Placeb  |  |
| expenditure to benefit C/OF  | Steve Javing  | Abiler Cit, Cancil-  | Place Aslane City Carel   |  |
| Date   | Payee name  |  |   |  |
| 06/may 2016  | PayPal  |  | · · · · · · · · · · · · · · · · · · ·   |  |
| Amount (\$)  | Payee address; City; State; Zi  | ip Code  |   |  |
| 9,00   | Online Website - unkni  | un Address / inter   | net   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Fees (transaction feels from d  | Check if travel ou   | utside of Texas. Complete Schedule T.<br>n, TX, officeholder living expense   |  |
| Complete ONLY if direct expenditure to benefit C/OF  | Candidate / Officeholder name Steve Savese                                      | Office sought Asher ChyConch Plus  | office held fice 6  Abile-e City(and)   |  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  |   |  |   |  |

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Rembursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Advertising Expense Event Expense Transportation Equipment & Related Expense Fees Fond/Beverage Expense Gift/Awards/Memorials Expense Accounting/Banking Consulting Expense Polling Expense Printing Expense Travel In District Travel Out Of District Contributions/Donations Made By Other (enter a category not listed above) Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee Credit Card Payment The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME 4 Date 5 Payee name City; State; Zip Code 7 Payee address; (a) Category (See Categories listed at the top of this schedule) 8 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF EXPENDITURE Office held ndidate / Officeholder name 9 Complete ONLY it direct expenditure to benefit C/OH (arc)-Pice Payee name Date City; State; Zip Code Pavee address; Amount (\$) Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date City; State; Zip Code Payee address; Amount (\$) Category (See Calegories listed at the top of this schedule) Description Check if travel outside of Texas, Complete Schedule T. PURPOSE Check it Austin, TX, afficeholder living expense OF EXPENDITURE Office held Office sought Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

#### SCHEDULE G

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Office Overhead/Rental Expense Politing Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Accounting/Banking Consulting Expense Travel in District Printing Expense Travel Out Of District Contributions/Donations Made By Other (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule G: 2 FILER NAME 5 Payee name 30 APR 2016 uce book City; State; Zip Code Reimbursement from political contributions (b) Description 8 PURPOSE Check if travel outside of Toxas. Complete Schedule T. Check if Austin, TX, officeholder living expense EXPENDITURE Office held Office squaht 9 Complete ONLY if direct expenditure to benefit C/OH Date Zip Code State: Amount (\$) Pavee address: Reimbursement from political contributions intended (b) Description es listed at the top of this schedule) PURPOSE Check if travel outside of Texas, Complete Schedule T. OF Check If Austin, TX, officeholder living expense EXPENDITURE Office held Office sought Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date City; State; Zip Code Payee address; Amount (\$) Reimbursement from political contributions intended (b) Description Category (See Categories listed at the top of this schedule) PURPOSE Check if Iravel outside of Texas. Complete Schedule T. OF \_\_ Check it Austin, TX, officeholder living expense EXPENDITURE Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

### EXPENDITURES MADE BY CREDIT CARD

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Food/Beverage Expense Gdt/Awards/Memorials Expense Polling Expense Travel In District Consulting Expense Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Other (enter a category not listed above) Legal Services Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 Total pages Schedule F4: 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date 6 Payee name City; State; Zip Code 8 Payee address; TYPE OF EXPENDITURE Political Non-Political (a) Category (See Categories listed at the lop of this schedule) (b) Description 10 Check if travel outside of Texas. Complete Schedule T. PURPOSE OF Check if Austin, TX, officebolder living expense EXPENDITURE Office sought TI Complete ONLY if direct / Officeholder name expenditure to benefit C/OH City; State; Zip Code Payee address; Address - internet TYPE OF Non-Political Political EXPENDITURE Description Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. PURPOSE Check if Austin, TX, officeholder living expense EXPENDITURE Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Abilene City ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED